

the pulse

The Official USU Newsletter

Volume 6, Issue 14 • September 11, 2011
www.usuhs.mil

**Ten years later:
USU remembers
September 11**



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USU Remembers 9/11

Sunday, September 11, 2011, marks the 10th anniversary of the terrorist attacks on America. Almost immediately after the planes hit the World Trade Center, the Pentagon, and crashed in the field in Pennsylvania, USU staff, faculty, alumni and students were responding in a number of ways, highlighting their commitment to the university's mission of "Caring for those in Harm's Way."

In this issue of the Pulse, USU personnel look back on what they remember about that day, how they were called to respond, and how that day affected their lives.

I know that each of us can recall exactly where we were when we heard the news and then saw the terrible events unfolding on the television. I know that I do.

That day has transformed our country in ways that probably won't be fully apparent

for many years to come, but in ways that are already quite obvious. From Iraq to Afghanistan, to long lines at security checkpoints at airports, these things have come to define the past decade.

As we remember those who lost their lives on September 11, those who have lost their lives since defending our country, and those whose lives have been forever changed by wounds they have incurred, let us also be thankful that we have endured and that we will unite around the common cause of protecting our country for those who will follow us.



Charles L. Rice, M.D.
President

Steaming to Assist

by Christine Creenan-Jones

It was a Tuesday morning and a small leak had sprung on the second floor of Building A, creating quite a stir among USU's researchers. Growing pools of water inside campus laboratories threatened to slow their important work.

Lt. Col. Kevin Riley, Ph.D., a senior administrator in USU's Department of Military and Emergency Medicine at the time, was sympathetic but not overly concerned. The seasoned officer had travelled to Somalia in the crux of civil war, helped bring democracy to Panama, and organized special military operations on a battlefield in Saudi Arabia.

Dripping pipes was an easy fix, he thought. So, Riley was surprised to find groups of people clamoring down USU's halls – confused and forlorn.

Their worry had shifted from the research they were conducting to a much bigger tragedy. The World Trade Center in New York had been struck by two planes. A short time later, the Pentagon in Washington, D.C. was hit.

Riley – trained by the Air Force to manage such disaster – immediately went into action.

He and several other USU leaders met with then-president James Zimble and the Brigade Commander to formulate emergency plans. Dr. Zimble, a retired Navy rear admiral, was "steaming to assist," but like all good leaders, wanted to make sure his crew was taken care of first.

"Our top priority was getting immediate accountability for all USU people, including our students and faculty stationed across the United States," said Riley. "Then we began figuring out ways to help."

These combined efforts and President Zimble's decision to continue holding classes helped create a sense of normalcy on campus, despite the external chaos.

"I had worked many special operations for the military before coming to USU, so I know it's really important to maintain order during crisis moments," Riley said. "The university performed exceptionally well in this vein, showing incredible discipline and restraint when panic could have easily taken over."

USU was so organized, in fact, that even complex pieces of the curriculum continued despite considerable barriers. Operations Kerkesner and Bushmaster, for example, normally held in Texas, were carried out on baseball fields adjacent to the university instead just a few days after Sept. 11.

"The academic program had to continue, and field exercises are important pieces of the curriculum, especially during these tumultuous times," Riley said. "Since our students couldn't fly to the normal training grounds, we improvised. Both operations went off without a hitch thanks to a lot of hard work from many volunteers."

"USU's motto, learning to care for those in harm's way, existed before the September 11 attacks on America," Riley said. "But never before was there such purpose to our resolve, which continues for our doctors and nurses today in Iraq and Afghanistan, and in our military hospitals at home and abroad."



For MEM professor, memories remain

by Staff Sgt. Matthew Rosine

While many people have a myriad of pictures, feelings and memories about September 11, 2001, one USU professor has a unique perspective to the events.

On that morning, Jim Holliman, M.D., F.A.C.E.P., Center for Disaster and Humanitarian Assistance Medicine and professor of Military and Emergency Medicine was playing host to a special group of international visitors.

"I was hosting a group of four physicians from Iran who were being trained in my faculty development program conducted by Penn State University in conjunction with George Washington University," Dr. Holliman said.

Dr. Holliman was driving the group in a van to Reading, Pennsylvania so they could ride along on ambulance calls, when the rock 'n' roll radio station interrupted regular programming with an announcement that a plane had struck the World Trade Center.

"I remember thinking how weird it was," he said. "But, after the second plane hit, I told my visitors that it had to be a terrorist attack. Their eyes got wide, and things got really tense."

Following the initial attacks, Holliman and his visiting physicians took action.

"These physicians volunteered to donate blood if required and travel with

me to assist if we made a travel response to New York City," Dr. Holliman said.

Traveling to New York was a very real concern for Dr. Holliman. Not only was the number of casualties a concern, but he also knew the immense dust cloud following the attacks would severely threaten people suffering from asthma or respiratory diseases throughout New York.

The Pennsylvania Department of Health asked Dr. Holliman to collect and organize a group of emergency physician volunteers to provide backup response for New York City. "I was able to organize a volunteer group of several hundred emergency physicians, nurses and emergency medical technicians with transportation assets fairly quickly," said Dr. Holliman.

"We were also able to communicate with the affected hospitals in New York City by email and placed our volunteer group on standby to respond to New York only if directly requested by the hospitals or civil authorities there," he said. "This valuable team of medical professionals vigilantly stood by and waited, but eventually received notification that our volunteer group was not needed and we stood down."

The September 11 attacks didn't just affect Holliman locally. For some time, he had been working to establish the first Multi-National Middle Eastern Conference on Emergency Medicine. The conference had been scheduled for October 2, 2001 in Istanbul. But, because of security concerns for Americans flying following the attacks, dozens of presenters canceled.

"I had to completely reorganize the event," Dr. Holliman said. "In fact, I had to give 28 presentations to fill in for cancellations."

Now, 10 years after that tragic day, the memories remain strong for Dr. Holliman.

"I remember at first how worried I was that we would have to activate the plan from Operation Desert Shield/Desert Storm for casualty backup," Dr. Holliman said. "Later, when I heard about the limited number of survivors, it left me feeling very depressed. But I was also inspired and reassured by the tremendous domestic volunteer response we had to the events and by the strong and genuine international support we received. I still receive condolence memory messages from international colleagues on every anniversary of September 11."

Personal grief for a very public event

by Ken Frager

Daniel K. Jackson, an education technician in the USU multidiscipline laboratories heard about the attack on the Pentagon while working in the anatomical labs and listening to the radio. A sinking feeling in his stomach told him that something terrible was happening. Like many who worked in the Washington metropolitan area at the time, Jackson knew people who worked at the Pentagon, including his father, Jimmie Holley.

"My parents had been married for two years in 2001 but they had been together for more than 20 years," said

Jackson. "He wasn't my birth father, but he adopted me and my sister and treated us like we were his own, always calling me his son. He was a great man."

Mr. Holley worked in accounting for the Army at Ft. McNair and Jackson's mother, Martha Jackson-Holley, worked at Ft. Myer, with an office that overlooked the Pentagon. When the plane hit the Pentagon it did so right where Mr. Holley happened to be working, killing him instantly, and within sight of Mrs. Jackson-Holley.

Continued to page 4



Photo by Ken Frager

Educational technician Daniel Jackson displays photos and memorabilia from September 11, 2001 to remind him of his father, who was killed while working at the Pentagon.

Answering the call

by Ken Frager



Photo by Ken Frager

Toya Randolph's office walls are adorned with recognition she received for her role in the aftermath of the September 11 attacks in New York.

Toya V. Randolph, PhD, MSPH, Director, Office of Sponsored Programs at the USU, was in Atlanta on September 11, 2001. An Epidemic Intelligence Service (EIS) Officer at the Centers for Disease Control and Prevention, Dr. Randolph was participating in the weekly rounds with her colleagues over a video feed. Not long after the rounds began the video feed went dead, something that wasn't too uncommon

and usually resolved relatively quickly. But the signal didn't return so the group completed their discussions locally and was preparing to break when they were told to evacuate the building.

"We didn't know what was happening, but we all complied, returning to our desks to get personal items and then went home to wait," said Dr. Randolph, who was also a Lieutenant Commander in the U.S. Public Health Service Commissioned Corps. "I watched the news reports on television in shock, but knowing that at some point our team would be called. When the call came in later that day to report to headquarters I did so without hesitation. Being in uniform made packing pretty easy," she said. "But the wait went on for several days before we were allowed to respond to the request for assistance from the New York City Department of Health."

Dr. Randolph and 13 other EIS Officers were part of the first group assigned to support the hospitals in the New York City area, with the primary assignment of identifying signs and symptoms of bioterrorism among emergency room patients. Following a six-hour crash course in bioterrorism, she was assigned to a

hospital on Coney Island. During her three-plus weeks of 12 hour shifts Dr. Randolph said she tried to avoid visiting the actual Ground Zero site. "I decided that it would have been too difficult to focus on my assigned duties so I tried to avoid it."

Try as she might, she found herself looking out at the devastation following a double-shift one morning. "I was exhausted and fell asleep in the shuttle from the hospital to the hotel," said Dr. Randolph. "When I woke up, apparently someone had asked the shuttle driver to drive by the site. I woke up to the smells and sounds and sight of people who were working so hard. They had the look of determination on their faces, mixed with so much sadness. I found myself shaking and crying. When we finally got back to the hotel I slept for 20 straight hours, but when I woke up the smells were still stuck in my head."

As traumatic as the experience was for Dr. Randolph, the effects of the visit were even more long-lasting as she and her colleagues are now listed on the World Trade Center Health Registry, which was established to monitor the health effects of the workers and volunteers who visited and assisted in the recovery efforts. "Although I will be monitored for the rest of my life for potential health issues resulting from the 9/11 tragedy in New York City, I wouldn't have changed how I participated," she said. "I also developed many friendships and relationships that are everlasting. We stay in touch and often reflect on our experiences. We are a family...a family bonded together for unfortunate reasons."

Today, Dr. Randolph's office is adorned with awards and honors for her participation. "It was an honor to serve and I am thankful that we were recognized for our efforts," she says. "The sadness of the events and the memories are hard to set aside. I feel good about the service we gave and that we didn't allow fear to stop us from acting in the name of helping our nation."

Personal grief...

Continued from page 3

An article in The Washington Post said that nearly a year after the event, the only remains directly connected to Mr. Holley were a handkerchief and some other personal items.

"I was angry at first. My first reaction was to blame everyone," said Mr. Jackson. "But over the last 10 years I have come to terms and realized that I have too much to do taking care of two households, being a father figure to my niece and being there for my mom, so I can't be as angry anymore. They weren't emotionally able to view the remains when they were found, but they did

attend the burial and had written letters instead that were read. They do try now to attend many of the remembrance ceremonies that are held. Personally, I would rather pay my respects privately, outside of the limelight and away from the cameras. That means I can't easily visit on the anniversary of his death, but I can remember him in my own way."

According to Mr. Jackson, the USU community has always been supportive and respectful, many knowing how the tragedy effected his family. "People called and checked on me often and my workmates were there with me at the time and still are today," he said. "It is with their support that I know I can keep doing what I do."

Images forever etched

by Staff Sgt. Matthew Rosine

Ronald Rivenburgh remembers not only the iconic images of September 11, 2001, but also the images of that day that he captured for others.

When the attacks began Rivenburgh was a hospital corpsman at the National Naval Medical Center. And, like so many others, he experienced “shock and disbelief” as he watched the continuous news reports.

But, Rivenburgh’s role would not remain as a spectator for long.

Now an anatomical curator for USU’s Multidiscipline and Anatomical Labs, Rivenburgh was sent on a temporary duty assignment to Dover Air Force Base to support recovery efforts.

“As a funeral director/embalmer for the government, I was sent TDY for 30-plus days to the Dover Port Mortuary to prepare remains and track and photograph personal effects of victims,” Rivenburgh said. “I also did hands-on preparations to include embalming,

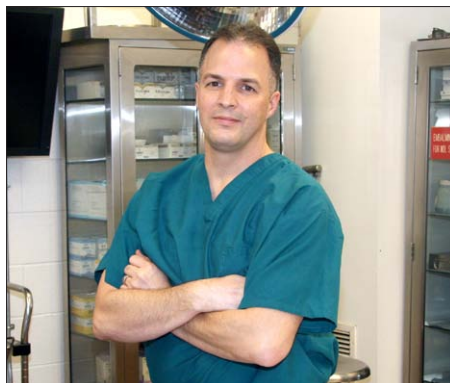


Photo by Ken Frager

Ronald Rivenburgh, a hospital corpsman at NNMCM on September 11, 2001, was detailed to Dover Air Force base to support recovery efforts.

bathing, dressing, casketing and shipping casualties of that horrible tragedy.”

And these images have had a lasting effect for Rivenburgh.

“What stands out most is my mind is photographing the personal effects of each victim,” he said. “When you

go through someone’s wallet, pockets or purse, you see who they are—their family pictures, the good luck charms, military coins, etc.

“In a job where death is how I meet the deceased, it’s different when you see their personal effects, and then read about them in the Washington Post,” he said. “These memories are forever etched in my mind.”

As these memories become stronger on the anniversary of September 11, Rivenburgh has not forgotten the images of that day or the impact these events had on him.

“As a funeral director, my perspective is different. I am employed in a government job where I wouldn’t have a job if some one did not die,” he said. “After September 11, 2001, it made me appreciate my family more, strengthened my support of our military. I saw first hand what these events did to the victims, not from some news report. It made me realize that I chose the right career path.”

Proud to be an American

by Christine Creenan-Jones

Raymond Handel could barely make out the Pentagon, even from the central courtyard. The iconic building was badly damaged when a hijacked commercial airplane slammed into the west-side on September 11, 2001.

The carnage was palpable – fires raged through battered office corridors and tar-colored smoke billowed from the gutted facade. Worse yet, more than a hundred Americans died – some aboard the plane, others inside the Pentagon.

Handel, an operations manager at USU’s Center for Disaster & Humanitarian Assistance Medicine and a trained paramedic, was among the legion of local volunteers rearing to help.

For hours, his Bethesda-based rescue squadron fought intense fires from inside the open-air courtyard. “Access was restricted, but our vehicle was able to fit through the narrow spaces that separate the old World War II buildings,” he said. “We could

see where the plane’s airframe had penetrated four of the Pentagon’s five rings, and it was bulging through the remaining wall like a giant torpedo.”

Handel’s rescue team, fighting from the inside, used high-powered water jets to control the rising temperature. “We feared the last wall would ignite and cause more damage,” he said.

Their concerns were eventually tempered when a new round of volunteers was finally able to snuff all of the Pentagon’s fires several days later. By this time, Handel had already worked for more than 18 hours – both inside and outside of the Pentagon’s walls.

“Smoke had thoroughly invaded the ventilation system, so we had to look inside each room to make sure nobody was left behind. Thankfully, we did not find any casualties. But it was still a surreal experience. Office clocks were frozen at 9:37 – the time of impact, walls had turned black with soot, and debris



was scattered everywhere,” he said. “I’ll never forget the wreckage we saw.”

Handel may have been grieving with the rest of America that day, but he was also overcome with feelings of hope. “Around midnight, my crew finally had an opportunity to grab something to eat. On our way back to the Pentagon, we saw an enormous flag draped over an industrial crane,” he said. “It was incredible – for a moment, everyone on the crowded streets stopped and stared, proud to be an American.”

In their own words

ENS Austin Yoder, MS3 USUHS SOM Class of 2013, Former Navy MH-53E helicopter pilot

On the morning of 9-11-2001 I was driving to work at Naval Advanced Helicopter Flight School at Whitting Field, FL when I heard on the radio of a plane crash in New York City. By the time I arrived at the Ready Room and began preparing for my flights that day we were all transfixed on the TV, which was broadcasting live footage of the second plane crash into the World Trade Center. During the next few hours the FAA grounded ALL flights across the U.S., including commercial flights enroute to their destinations, and including military training flights. All aircraft were directed to land as soon as possible regardless of their location. We didn't fly that day or the next, and were glued to the TV trying to sort out what was happening. The following months of training were intensified with a direction and a zeal for duty and obligation that didn't exist before the attacks. Having an enemy identified as a target for our energy and focus sharpened us and made us work harder to begin the task at hand... fighting a war that was just beginning to materialize. We all went our separate ways, some directly to the desert in Cobras and Hueys in the Marine Corps, and some directly to sea flying Sea Knights and Sea Stallions in the Navy. No matter what our destinations were, we were all changed on 9-11 and will probably not forget it.

James G. Smirniotopoulos, M.D. Program Director, Diagnostic Imaging Program Center for Neuroscience and Regenerative Medicine (CNRM) Professor of Radiology, Neurology, and Biomedical Informatics

It was the first day of the MS2 Radiology course and we were

preparing for a lecture. The students asked if we could watch CNN for a few minutes. We had all just learned of the second plane strike, so students and faculty were beginning to grasp what was happening.

After a few minutes, one of our Radiology faculty members said, "We are now going to have class, because what we are all about is working while bad things happen all around us." That was the last lecture of the day, followed by the "evacuation" of the school. Many of us stayed here on campus - basically "against orders" - to be available for the hospital if we were needed.

Air Force Capt. Carol Kelley USU GSN Family Nurse Practitioner Class of 2012



I became a nurse after September 11, 2001.

On September 11, 2001 I was a Flight Attendant for United Airlines (UA) based in New York City flying out of La Guardia and JFK airports. I also was a Medical Technician in the U.S. Air Force Reserve based at Ft. Hamilton in Brooklyn, NY. I was on a Boeing 757 in flight near Chicago when the first plane struck the World Trade Center. I was en route to San Francisco with a scheduled layover at Chicago O'Hare. We landed as planned, got off the jet way to change aircraft and found pandemonium in the airport. We, the crew, went to the domicile to see what was going on. As I

entered the domicile I saw the South tower go down on the TV! I could not understand how this happened! We had just left New York City and it was a very clear day, so it was inconceivable that it was an accident. My vocabulary was unaccustomed to the word "terrorism" and I was dumbfounded and stunned.

The crew and I were grounded and stranded at an airport hotel for five days, during which time I watched the news 24-7. It was mind-blowing.

I called my Reserve medical unit to report my absence, thinking we had been activated. As it turned out, New York City did not know we were an available asset, and we were not called upon. I volunteered to work the first flight back, so I could get back to my apartment in Queens, and figure out what to do next. It was a sad and desperate time; we spent many days going into Manhattan trying to help-out. New Yorkers rallied well, but laymen were not needed. Instead, we would stand around cheering the crews coming and going to clear debris. We also participated in many bike rallies to raise money for our fire departments.

One year later on September 11, I again volunteered to fly, as many of my peers were too affected to fly. United Airlines, operating in bankruptcy, began a series of lay-offs and furloughs. I had six years seniority, which was not enough to be protected so in 2003 it was my turn to be furloughed. I was given a two year furlough, which means no job or paycheck, still an employee but no benefits, except flying space available for a fee. As a result of bankruptcy, the fees were no longer as cheap as they originally had been. Over the years many things changed, and the flying was not as enjoyable or profitable. The pay was cut, the flying hours lengthened, and the layovers became shorter.

When I got furloughed I decided to use the GI Bill to go to nursing

school. I moved back to my hometown, Tupelo, Mississippi, and earned an ADN. After the first semester of school I was recalled, at that point I was enjoying school and so I decided to resign from United Airlines. The first year I worked as a nurse, I went to school on-line to earn the BSN. A year later I went active duty Air Force. After two years of Air Force nursing, I applied for the GSN program and now I am here working on the FNP.

From time to time I miss flying, the way it was in the old days. However, life can never be the same again, so carefree. Now I am a Captain in the Air Force, serving my country, married with two crazy-little girls and feeling fulfilled and proud of my country.

**Jennifer Bornemann, M.S.S.W.
Lieutenant Commander, United States
Public Health Service
Center for the Study of
Traumatic Stress**

I lived in NYC from February 1998 - March 2010. On September 11, 2001, I was attending a meeting in Jamaica, Queens. At the time I was working on a faith-based initiative with NYC's Human Resources Administration. I guess you could say I was lucky as our meeting that morning was at the Allen AME Church which is led by former U.S. Congressman Rev. Floyd Flake. Even though I am not particularly religious, we all participated in prayers at the church all day. In between prayer sessions, we attempted to contact our family and friends to let them know we were okay (which took many hours).

Knowing that we were not allowed to return to our respective homes in Manhattan, my boss and I drove closer to home and stayed at a colleague's apartment in Long Island City, Queens. We all walked around in a bit of a zombie-like nature while watching the coverage. I kept wondering how all of my friends were doing, when could I get home to my apartment in Manhattan and what could I do to help.

We were able to return across the Queensboro/59th Street early on the morning of September 12. That day was marked with information gathering from friends and loved ones. "Are you okay?"; "Did you know anyone?"; and "What can I do?" were the questions often spoken and heard.

I vividly remember the city in those days immediately following the attacks - the smoke from Ground Zero filled the air (I will never forget that smell), silence in the skies with the exception of the occasional jet fighter, the fear yet resiliency of the residents. Some colleagues and me (all social workers) went to the Javitz Center to see what we could do to help - EVERYONE wanted to help - but they were not able to accommodate the intense demand. It was incredibly frustrating wanting to help but not knowing how.

It did inspire me to join the NYC Medical Reserve Corps so that I would be able to help during another time of need, which led to me serving as an American Red Cross volunteer immediately after Hurricane Katrina and eventually on to the U.S. Public Health Service.

That was my 9/11. Not too exciting but a time that I will never, ever forget.

**Stephen J. Cozza, M.D.
Professor, Department of Psychiatry
Center for the Study of
Traumatic Stress**

As chair of the Department of Psychiatry at Walter Reed Army Medical Center (WRAMC) on September 11, 2001, I was in the dental clinic at Walter Reed having a filling replaced when the attacks began. I had forgotten to wear my contact lenses that day, so my vision was slightly blurry. When I saw the image on the clinic waiting room television of the first tower of the World Trade Center smoking, my initial impression was that it was a news story about a nuclear reactor plant. I didn't initially realize the seriousness of the event.

I returned to my office to learn that the second tower had been hit. Shortly thereafter, we heard rumors that a bomb had exploded at the Pentagon. My first thoughts were for the safety of my family. Fortunately, my wife was off from work that day, the children were cared for, and the home front was secure.

WRAMC contained the largest number of mental health workers in the National Capital Area and I knew that the effective use of those resources would be key to a successful mental health response. I attended the WRAMC command Emergency Operation Center meetings and planned for our participation. We focused on the patients and staff at the hospital first, deploying to the Pentagon the following morning.

I remember thinking that the attack would have a major impact upon all of our lives. But I didn't comprehend the magnitude it would have on my colleagues at WRAMC and me over the weeks, months, and years to come. The lessons we learned that day and for the following weeks have been used to help others touched by tragedy and trauma recover and cope.

**William Kelly, M.D.
Assistant Professor
Department of Medicine**

I was the rotating Fellow through the surgical intensive care unit (SICU) at Walter Reed Army Medical Center and had just started rounds with the residents. Each patient room has a television, even if the patient is too sick to watch it. We looked up and saw the first news reports of a plane hitting the World Trade Center. Shocked, we still came up with a plan for our first patient and then moved on to the next room. By then, the second tower had been hit and I knew there was no hope of this being a crazy accident. Shortly thereafter we saw that a plane hit the Pentagon

Continued to page 8

An FNP student remembers

by Staff Sgt. Matthew Rosine

For one USU family nurse practitioner student the events of September 11, 2001 remain vibrant.

"I was at home when the morning news shows began to show the aftermath of the first World Trade Center impact. I watched the second aircraft ram the second tower and immediately knew that it was an intentional act on the part of pilots (unknown to be terrorists at that initial time)," said Maj. William Meek, who was an emergency nurse at Walter Reed Army Medical Center (WRAMC) at the time. "I called the WRAMC ER and spoke with the charge nurse about the incident. After the immediate response of 'you're pulling my leg again' I was able to talk the charge nurse into

going to the television in the waiting room to check the news."

The shock of the event was initially overwhelming.

"When the plane hit the Pentagon, I called and spoke to the charge nurse again," said Meek. "I told him the Pentagon had been hit, and they needed to send ambulances to the site. I got off the phone, took a shower, packed a three-day bag and headed to the WRAMC ER—I received the alert recall while I was packing my bag."

When Maj. Meeks arrived at WRAMC he had his hands full.

According to Meek, this officer survived his wounds and was medically retired from the service.

Maj. Meek's medical support efforts did not end there. He continued to work at the WRAMC ER as a manager and as a staff nurse through the hard days that followed.

Ten years later, Maj. Meeks said his memory is clear about the role he played that day.

"It was a surreal day and I am proud of the manner in which the WRAMC ER nursing team responded to and cared for victims of that tragic day," he said. "I am proud of having been part of a team of physicians, nurses and medics that were not only witnesses to a critical moment in the history of our country, but active participants working our hardest to save lives that day."

In their own words

Continued from page 7

and we knew we were at war. My staff (supervisor) doctor that day, Col. Jim Geiling, happened to be the chief of the Pentagon medical clinic at the time, and he left right away to try to help. This left me in charge of the SICU. He told me later that even he had trouble getting in due to the chaos/security at the crash site. He also had to break the glass on the medicine cabinets there as the computers/electric locks were down. My wife and young son could see the Pentagon burning from our apartment. There was also a rumor that the State Department has been bombed. Our medical campus that had been wide open like any other hospital was now locked down with armed soldiers. It truly seemed to be the end of the world -- but we had work to do.

We got supplies ready for the anticipated wounded. I remember photocopying a handout on burns management for the teams to review. There was an eerie quiet for a while but we soon got our first -- and one of our few -- victims. He was a middle-aged man, badly burned, crying and with an intermittent terrible high-pitched scream. With a 15:1 provider to patient ratio at the time, he certainly was getting plenty of attention, being put on

a ventilator, having his wounds treated and given lots and lots of intravenous fluids. There was not much for me to do. My contribution was expediting the delivery of the morphine into his body to numb his pain. I recall being so angry that someone could do this to this poor man. In the end, the best we could do, and the appropriate thing to do, was to stabilize him and then transfer him out to a specialized burn center. It was a long night. After that shift I volunteered to go to the Pentagon. There were still rumors, including risk of secondary explosions and the possible presence of chemical weapons/biologic agents being on the planes when they crashed. Me and a few other doctors and nurses were bussed down in the evening. It was surreal. We had a police escort from the start, but along the way, other police officers, perhaps looking for a way to contribute or just do something, anything, joined our motorcade. We certainly got through traffic quickly with more than 20 police cars and motorcycles escorting our bus by the end of our ride.

There were tons of ambulances and construction and rescue workers walking around. But it also was part carnival, with perhaps 100 different trailers and tents set up on the Pentagon lawn and parking lot. The Red

Cross and other organizations were there handing out food and water. I was frustrated that FEMA (civilian emergency agency) got to run the show despite it being a military facility. We did set up our own tents, a complete emergency room/intensive care unit, and waited. But because the blast was so devastating, there were very few people to rescue—it was mostly "recovery." The big hole in the building still smelled of smoke and jet fuel. Water poured out of the cracks and saturated the ground. I got a shift as the doctor with "casualty/mortuary affairs," basically going in and waiting for "remains" to be found. I had a stethoscope, but there was not much use for it. Some of the young soldiers doing the real work had special jumpsuits on. I just wore a mask and some gloves. There were a lot of salutes. I just tried to put them at ease and kept thinking how stressful it must have be for them.

A couple weeks later I was back in the Walter Reed SICU when First Lady Laura Bush came through to visit some of the recovering wounded. It's hard to believe it has been 10 years. On my desk as a reminder, I keep a copy of a picture I took that night showing the hole in the Pentagon.